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PTO/SB/21 (09-04)

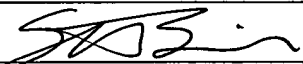
Approved for use through 07/31/2006. OMB 0651-0031

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|   |                        |                       |
|---|------------------------|-----------------------|
| <b>TRANSMITTAL FORM</b><br><br>(to be used for all correspondence after initial filing) | Application Number     | 10/766,488 Conf.#1533 |
|   | Filing Date            | January 29, 2004      |
|   | First Named Inventor   | Shin Ishibashi        |
|   | Art Unit               | 2874                  |
|   | Examiner Name          | Akm E. Ullah          |
| Total Number of Pages in This Submission  | Attorney Docket Number | 31238-200393          |

| ENCLOSURES (Check all that apply)  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><br><input type="checkbox"/> Fee Attached<br><br><input checked="" type="checkbox"/> Third Preliminary Amendment<br><br><input type="checkbox"/> After Final<br><br><input type="checkbox"/> Affidavits/declaration(s)<br><br><input type="checkbox"/> Extension of Time Request<br><br><input type="checkbox"/> Express Abandonment Request<br><br><input checked="" type="checkbox"/> Second Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><br><input type="checkbox"/> Reply to Missing Parts/ Incomplete Application<br><br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><br><input type="checkbox"/> Licensing-related Papers<br><br><input type="checkbox"/> Petition<br><br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><br><input type="checkbox"/> Terminal Disclaimer<br><br><input type="checkbox"/> Request for Refund<br><br><input type="checkbox"/> CD, Number of CD(s) _____<br><br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><br><input type="checkbox"/> Proprietary Information<br><br><input type="checkbox"/> Status Letter<br><br><input type="checkbox"/> Other Enclosure(s) (please identify below): |
| <div>Remarks</div>   |  |  |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |  |          |        |
|--|--|----------|--------|
| Firm Name                                  | VENABLE LLP  |          |        |
| Signature                                  |  R # 42,159 for |          |        |
| Printed name                               | Michael A. Sartori, Ph.D.  |          |        |
| Date                                       | June 6, 2005   | Reg. No. | 41,289 |

DC2-654808



PTO/SB/17 (12-04v2)

Approved for use through 7/31/2006. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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|   |  |                          |                       |
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| <b>Effective on 12/08/2004.</b><br><b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b><br><b>FEE TRANSMITTAL</b><br><b>For FY 2005</b> |  | <b>Complete if Known</b> |                       |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27  |  | Application Number       | 10/766,488 Conf.#1533 |
| <b>TOTAL AMOUNT OF PAYMENT</b>  |  | Filing Date              | January 29, 2004      |
| <b>(\$)</b> 5,500.00  |  | First Named Inventor     | Shin Ishibashi        |
|   |  | Examiner Name            | Akm E. Ullah          |
|   |  | Art Unit                 | 2874                  |
|   |  | Attorney Docket No.      | 31238-200393          |

|   |   |
|---|---|
| <b>METHOD OF PAYMENT</b> (check all that apply)   |   |
| <input type="checkbox"/> Check  | <input type="checkbox"/> Credit Card  |
| <input type="checkbox"/> Money Order  | <input type="checkbox"/> None   |
| <input type="checkbox"/> Other (please identify): _____   |   |
| <input checked="" type="checkbox"/> Deposit Account   | Deposit Account Number: <u>22-0261</u> Deposit Account Name: <u>Venable LLP</u>   |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)                |   |
| <input checked="" type="checkbox"/> Charge fee(s) indicated below   | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 | <input checked="" type="checkbox"/> Credit any overpayments                       |

|   |                     |   |                    |                              |                         |                              |                              |
|---|---------------------|---|--------------------|------------------------------|-------------------------|------------------------------|------------------------------|
| <b>FEE CALCULATION</b>  |                     |   |                    |                              |                         |                              |                              |
| <b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>  |                     |   |                    |                              |                         |                              |                              |
|   | <b>FILING FEES</b>  |   | <b>SEARCH FEES</b> |                              | <b>EXAMINATION FEES</b> |                              |                              |
| <b>Application Type</b>   | <b>Fee (\$)</b>     | <b>Small Entity Fee (\$)</b>                            | <b>Fee (\$)</b>    | <b>Small Entity Fee (\$)</b> | <b>Fee (\$)</b>         | <b>Small Entity Fee (\$)</b> | <b>Fees Paid (\$)</b>        |
| Utility   | 300                 | 150   | 500                | 250                          | 200                     | 100                          |                              |
| Design  | 200                 | 100   | 100                | 50                           | 130                     | 65                           |                              |
| Plant   | 200                 | 100   | 300                | 150                          | 160                     | 80                           |                              |
| Reissue   | 300                 | 150   | 500                | 250                          | 600                     | 300                          |                              |
| Provisional   | 200                 | 100   | 0                  | 0                            | 0                       | 0                            |                              |
|   |                     |   |                    |                              |                         |                              | <b>Small Entity</b>          |
|   |                     |   |                    |                              |                         |                              | <b>Fee (\$)</b>              |
| <b>2. EXCESS CLAIM FEES</b>   |                     |   |                    |                              |                         |                              | <b>Fee (\$)</b>              |
| <b>Fee Description</b>  |                     |   |                    |                              |                         |                              | <b>Small Entity Fee (\$)</b> |
| Each claim over 20 (including Reissues)   |                     |   |                    |                              |                         |                              | 50                           |
| Each independent claim over 3 (including Reissues)  |                     |   |                    |                              |                         |                              | 200                          |
| Multiple dependent claims   |                     |   |                    |                              |                         |                              | 360                          |
| <b>Total Claims</b>   |                     |   |                    |                              |                         |                              | <b>Fee Paid (\$)</b>         |
| - 20 = 66 x 50.00 = 3,300.00  |                     |   |                    |                              |                         |                              |                              |
| <b>Indep. Claims</b>  |                     |   |                    |                              |                         |                              | <b>Fee Paid (\$)</b>         |
| - 6 = 11 x 200.00 = 2,200.00  |                     |   |                    |                              |                         |                              |                              |
| <b>3. APPLICATION SIZE FEE</b>  |                     |   |                    |                              |                         |                              |                              |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |                     |   |                    |                              |                         |                              |                              |
| <b>Total Sheets</b>   | <b>Extra Sheets</b> | <b>Number of each additional 50 or fraction thereof</b> |                    | <b>Fee (\$)</b>              | <b>Fee Paid (\$)</b>    |                              |                              |
| - 100 =   | /50                 | (round up to a whole number) x                          |                    | =                            |                         |                              |                              |
| <b>4. OTHER FEE(S)</b>  |                     |   |                    |                              |                         |                              | <b>Fees Paid (\$)</b>        |
| Non-English Specification, \$130 fee (no small entity discount)   |                     |   |                    |                              |                         |                              |                              |
| Other (e.g., late filing surcharge):  |                     |   |                    |                              |                         |                              |                              |

|                     |                           |                                   |                |
|---------------------|---------------------------|-----------------------------------|----------------|
| <b>SUBMITTED BY</b> |                           |                                   |                |
| Signature           | <u>Michael A. Sartori</u> | Registration No. (Attorney/Agent) | 41,289         |
| Name (Print/Type)   | Michael A. Sartori, Ph.D. | Telephone                         | (202) 344-4000 |
|                     |                           | Date                              | June 6, 2005   |

DC2-654804